



TOWN OF NARRAGANSETT
Building Inspection Department
25 Fifth Avenue Narragansett, RI 02882
Tel (401) 782-0619 Fax (401)782-0620

Rental Dwelling Registration
For all Rented Dwellings

TO BE POSTED INSIDE THE PRIMARY ACCESS DOOR OF THE DWELLING WITH AN ACTIVE LEASE

This registration is for a one-year period and shall be renewed annually in December. Failure to do so may result in a fine of up to \$500.00 per day for each day the rental dwelling is not registered.

Property Address _____ Plat _____ Lot _____

Number of Units: _____ Fee Due: _____ (\$50.00 per unit)

Number of Bedroom: _____

Type of Rental: September – June, Summer, Yearly or Not a rental (please circle)

Owner _____
Address _____

Home Phone _____
Work Phone _____

Out of State Landlords must have an instate contact for the rental dwelling per Section 34-48-22.3 of the State of Rhode Island General Laws

Name of Agency _____
Contact Name _____
Address _____

Work Phone _____

I HEREBY CERTIFY that the above information is true and correct. I understand that any false statements made herein are subject to penalties under law. I further understand that, in accordance with Section 14-519 of the Code of Ordinance of the Town of Narragansett, THE LEASE (WITH NAMES OF ALL ACTIVE TENANTS AND THIS REGISTRATION FORM AND THE TOWN ORDINANCES ARE TO BE POSTED INSIDE THE PRIMARY ACCESS DOOR OF THE DWELLING UNIT for inspection by police, zoning, building or minimum housing officials of the Town of Narragansett. Ordinances are available online or in the Building Inspection Office. Please copy this form for yourself and your tenants records or send a self addressed stamped envelope and we will mail you a receipted copy.

Owner(s) /Agent Signature _____

Date _____